

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90110 001 ****61.25

DOCUMENT # 729359 1. Entity Name HIGH POINT OF DELRAY BEACH CONDOMINIUM ASSOC. SEC. 5, INC.					
Principal Place of Business 1103 CLUB DRIVE WEST DELRAY BEACH, FL 33445			Mailing Address 1103 CLUB DRIVE WEST DELRAY BEACH, FL 33445		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1833036	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DENTE, JOE 1180 D. SOUTH DR CIR DELRAY BEACH, FL 33445				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DENTE, JOE 1180 D. SOUTH DR CIR DELRAY BEACH, FL 33445	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Grounds Cykewick, Edward 1095 Cir. Terr. West DeLray Beach, FL 33445	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROSSI, ANGELO 1100 A NORTH DR DELRAY BEACH, FL 33445	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sales & Rental Cykewick, Carol 1095 Cir. Terr. West DeLray Beach, FL 33445	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DENTE, BETTY 1180 D SOUTH DR CIR DELRAY BEACH, FL 33445	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Club House Botti, Jerry 1150 Cir. Terr. West DeLray Beach, FL 33445	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ALLEN, ROBERT 1222 B SOUTH DIRVE WAY DELRAY BEACH, FL 33445	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARILOTTI, BRUCE 1117D SOUTH DRIVE DELRAY BEACH, FL 33445	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSSI, ANGELO 1100A NORTH DIVE DELRAY BEACH, FL 33445	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Joseph Dente</u> <u>Joseph Dente</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			2-2-07 Date		561-381-3329 Daytime Phone #